

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M. P.		3-22-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	52	TC 3-283	05-03-01
RESPONSE FORMALITY REVIEW	gpk	1020	7-2-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	4/12/04
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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